Medicaid Matters

Alabama selected as site for national electronic health record project

Broad support from community stakeholders and a firm commitment to technology, transformation and innovation has earned the state of Alabama one of 12 spots in a national Medicare demonstration project to improve the quality of patient care.

The June 11 announcement in Montgomery was made by U.S. Department of Health and Human Services Assistant Secretary for Planning and Evaluation Ben Sasse. State and federal officials joining Sasse for the announcement were Governor Bob Riley's Policy Director Bryan Taylor, Renard Murray, CMS acting bi-regional administrator, Drake Lavender, M.D., a family practice physician from Gordo, and Medicaid Commissioner Carol Steckel.

This five-year, first-of-its-kind project will provide financial incentives to small- and medium-sized practices to help offset the cost of implementing an electronic health records system, paying up to \$58,000 per physician or \$290,000 per practice over the duration of the project. Alabama will participate in Phase 2 of the project which is expected to begin in June 2009.



Family practice physician Drake Lavender, M.D., explains how EHRs have helped his rural practice in Gordo.

Sasse said the state's selection was based, in part, on the Alabama Medicaid Agency's strong application that carried with it the support of a diverse group of community stakeholders. Fourteen



HHS Assistant Secretary Ben Sasse and CMS Acting Bi-Regional Administrator Renard Murray presented a flag to celebrate the state's participation in the project. From left to right are Medicaid Medical Director Robert Moon, M.D., Drake Lavender, M.D., Sasse, Medicaid Deputy Commissioner Kathy Hall, Commissioner Steckel, Alabama Dept. of Senior Services Executive Director Irene Collins, Medicaid Medical Director Mary G. McIntyre, M.D., Bryan Taylor and Murray.

letters of support were included in the application. The application was also strengthened by the collaborative efforts now underway in conjunction with the Agency's "Together for Quality" initiative.

"The state of Alabama has already demonstrated a commitment to quality improvement and technical innovation

Continued on Page Two



Inside: • President Bush signs bill to delay implementation of six regulations

Alabama selected as site for CMS electronic health record project

Continued from Page One

through a variety of private sector initiatives as well as our Together for Quality Initiative," said Commissioner Steckel. "This new opportunity not only will enable us to facilitate the use of electronic health records by Medicare-enrolled primary care physicians, but also to transform

FLECTRONIC HEALTH RECORDS

Commissioner Steckel, Alabama Dept. of Senior Services Executive Director Irene Collins and Bryan Taylor, Governor Riley's Policy Director, discuss Alabama's selection in the EHR project. Senior Services is a partner in Medicaid's TFQ project.

Alabama's health care system in a significant and meaningful way."

Dr. Lavender, a proponent of EHRs, said electronic health records help the physician by providing 24/7 access to the entire medical record, whether the doctor is at home or at work. Access to an accurate and complete health record online works to decrease medical errors, while helping the physician provide preventive care in a timely manner by alerting the physician when a patient is due for screenings or tests, he added.

The other 11 sites chosen to participate in the project are Georgia, Louisiana, Jacksonville, Fla., Delaware, Maryland/Washington, D.C., Maine, Oklahoma, Pittsburgh, South Dakota, Virginia, and Madison, Wisconsin.

President Bush signs bill to delay implementation of six regulations

A supplemental war appropriations bill signed June 30 by President George Bush not only provided funds for war operations in Iraq and Afghanistan, but ended a protracted battle between the federal government and state health and human service programs over implementation of six Medicaid regulations.

The bipartisan legislation, **H.R. 2642, the Supplemental Appropriations Act, 2008,** puts under moratoria until April 1, 2009, six Medicaid regulations impacting graduate medical education, cost limits on providers operated by units of government, school-based administrative services, rehabilitation (rehab) service, targeted case management and provider taxes. A seventh regulation that limits the scope of services Medicaid will pay for in hospital outpatient settings was not included.

Without the moratoria, Alabama stood to lose at least \$578 million in the next year or as much as \$2.9 billion over the next five years, according to Medicaid Commissioner Carol H. Steckel, who expressed appreciation to Alabama's Congressional delegation for their leadership and support in preserving vital health care services in the state.

"Had these regulations been implemented, the Medicaid program in Alabama would have been devastated," Commissioner Steckel said. "It is our hope that during this interim period, that state Medicaid programs and the federal government will work together to identify solutions that will preserve basic and essential health care services for the nation's most vulnerable citizens."

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